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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											ing Date 03/2008	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY
FOR NUMBE			JMBER FIL	ILED NUM		MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A]	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A			N/A]	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),	E or (q))	N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *					X \$ =		1	X 8 =	
If the specification and drawings exceed 100 heterology of the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or Intach thereof. See 35 U.S.C. 41(q)(1)(g) and 37 CFR 1.16(g).												
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							П			1		
* f :	the difference in colu	umn 1 is less than	r "0" in colun		TOTAL		J	TOTAL				
APPLICATION AS AMENDED – PART II OTHER THA (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	06/08/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOU: PAID FOR	SLY }	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 31	Minus	** 32		= 0	П	X \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 1	Minus	3		= 0	П	X \$ =		OR	X \$220=	0
ΑM	Application Size Fee (37 CFR 1.16(s))									_		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						П			OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
ENDMENT	06/08/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	* 32	Minus	32		= 0	П	X \$ =		OR	X \$52 =	0
	Independent (37 CFR 1 16(h))	- 2	Minus	··· 3		= 0	П	x s =	, and the second	OR	X \$220 =	0
딟	Application Size Fee (37 CFR 1.16(s))									1		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
If the entry in column 1 is less than the entry in column 2, wite 0° in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For NT HIS SPACE is less than 3, enter "3".												

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